



PATENT

Case Docket No. ASA-919

In RE application of T. YAMADA et al.

Serial No.: 09/648,613

Group Art Unit: 2626

Filed: August 28, 2000

Examiner: S. Ebrahimi-Dehkordy

For: COLOR PRINTING APPARATUS

Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

|  | (COL. 1)                         |       | (COL. 2)                        |   | (COL. 3)      |
|--|----------------------------------|-------|---------------------------------|---|---------------|
|  | Claims Remaining After Amendment |       | Highest No. Previously Paid For |   | Present Extra |
| Total  | * 11                             | Minus | ** 11                           | = | 0             |
| Indep.   | * 2                              | Minus | *** 2                           | = | 0             |
| <input type="checkbox"/> First Presentation of Multiple Dependent Claims |                                  |       |                                 |   |               |

| SMALL ENTITY |                |
|--------------|----------------|
| Rate         | Additional Fee |
| x 9          | \$             |
| x 42         | \$             |
| + 140        | \$             |
| Total        | \$             |

| OTHER THAN A SMALL ENTITY |                |
|---------------------------|----------------|
| Rate                      | Additional Fee |
| x 18                      | \$ 0           |
| x 84                      | \$ 0           |
| + 280                     | \$ 0           |
| Total                     | \$ 0           |

- \* If the entry in Col. 1 is less than the entry in Col. 2, write '0' in Col. 3.
- \*\* If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, write '20' in this space.
- \*\*\* If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, write '3' in this space.
- The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

- ☐ Please charge my Deposit Account No. 50-1417 in the amount of \$ \_\_\_\_\_.
- ☐ A check in the amount of \$ \_\_\_\_\_ is attached in payment of: \_\_\_\_\_.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1417.
- ☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR 1.17.
- ☒ Any Extension of Time fees that are necessary, which are hereby requested if necessary.

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Date: September 2, 2005

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ASA-919

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:

Confirmation No.: 5525

T. YAMADA et al.

Serial No. 09/648,613

Group Art Unit: 2626

Filed: August 28, 2000

Examiner: S. EBRAHIMI-DEHKORDY

For: COLOR PRINTING APPARATUS

Customer No.: 24956

**AMENDMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed June 2, 2005, please amend the above-identified application follows.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 7 of this paper.